PART B - FEE(S) TRANSMITTAL Beable fee(s), to: Mail Mail Stop ISSUE F Complete and send this form, together with Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 JUL 1 7 2006 INSTRUCTIONS: This form should be used for consmitting the ISSE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance fiders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1 (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 7590 05/03/2006 23117 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. NIXON & VANDERHYE, PC 901 NORTH GLEBE ROAD, 11TH FLOOR ARLINGTON, VA 22203 (Depositor's name) (Signature) (Date) CONFIRMATION NO. ATTORNEY DOCKET NO. FIRST NAMED INVENTOR FILING DATE APPLICATION NO. 7357 4034-39 Shingo Jongan 10/629,873 07/30/2003 TITLE OF INVENTION: COLOR FILTER SUBSTRATE AND DISPLAY DEVICE DATE DUE TOTAL FEE(S) DUE **PUBLICATION FEE ISSUE FEE** SMALL ENTITY APPLN. TYPE 08/03/2006 \$300 \$1700 \$1400 nonprovisional NO **CLASS-SUBCLASS ART UNIT** EXAMINER 2871 349-106000 CHOWDHURY, TARIFUR RASHID 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list 1 Nixon & Vanderhye P.C. CFR 1.363). (1) the names of up to 3 registered patent attorneys LI Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to "Fee Address" indication (or "Fee Address" Indication form 2 registered patent attorneys or agents. If no name is PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Sharp Kabushiki Kaisha Osaka, Japan Please check the appropriate assignee category or categories (will not be printed on the patent):

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